

KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

This is an application to: (check one)

- ☐ Apply for a new permit.
☒ Apply for reissuance of expiring permit.
☐ Apply for a construction permit.
☒ Modify an existing permit.
 Give reason for modification under Item II.A.

A complete application consists of this form and one of the following:

Form A, Form B, Form C, Form F, or Short Form C

For additional information contact:

KPDES Branch (502) 564-3410

ENK 240-

I. FACILITY LOCATION AND CONTACT INFORMATION		AGENCY USE	0	0	4	2	7	6	5
A. Name of business, municipality, company, etc. requesting permit Nally & Hamilton Enterprises, Inc.									
B. Facility Name and Location					C. Facility Owner/Mailing Address				
Facility Location Name:					Owner Name:				
Wilder Branch Job					Nally & Hamilton Enterprises, Inc.				
Facility Location Address (i.e. street, road, etc.):					Mailing Street:				
KY 987 Rd's junction with Hen Wilder Branch					P.O. Box 157				
Facility Location City, State, Zip Code:					Mailing City, State, Zip Code:				
Balkan, KY 40977					Bardstown, KY 40004				
					Telephone Number: (502)364-0084				

II. FACILITY DESCRIPTION

A. Provide a brief description of activities, products, etc: Adding permit acres to original permit. Surface Mining.

B. Standard Industrial Classification (SIC) Code and Description

Principal SIC Code & Description:	1221		
Other SIC Codes:			

III. FACILITY LOCATION

A. Attach a U.S. Geological Survey 7 1/2 minute quadrangle map for the site. (See instructions)	
B. County where facility is located: Bell	City where facility is located (if applicable): N/A
C. Body of water receiving discharge: Hen Wilder Branch and Board Tree Hollow Br.	
D. Facility Site Latitude (degrees, minutes, seconds): 36° 45' 44"	Facility Site Longitude (degrees, minutes, seconds): 83° 33' 33"
E. Method used to obtain latitude & longitude (see instructions): ARC View GIS 3.2	
F. Facility Dun and Bradstreet Number (DUNS #) (if applicable): N/A	

IV. OWNER/OPERATOR INFORMATION**A. Type of Ownership:**

☐ Publicly Owned ☒ Privately Owned ☐ State Owned ☐ Both Public and Private Owned ☐ Federally owned

B. Operator Contact Information (See instructions)

Name of Treatment Plant Operator:

N/A

Telephone Number:

Operator Mailing Address (Street):

Operator Mailing Address (City, State, Zip Code):

Is the operator also the owner?

Yes ☐ No ☐

Is the operator certified? If yes, list certification class and number below.

Yes ☐ No ☐

Certification Class:

Certification Number:

V. EXISTING ENVIRONMENTAL PERMITS

Current NPDES Number:

Issue Date of Current Permit:

Expiration Date of Current Permit:

Number of Times Permit Reissued:

Date of Original Permit Issuance:

Sludge Disposal Permit Number:

Kentucky DOW Operational Permit #:

KYG0042765

Kentucky DSMRE Permit Number(s):

807-8056 AM01

C. Which of the following additional environmental permit/registration categories will also apply to this facility?

CATEGORY	EXISTING PERMIT WITH NO.	PERMIT NEEDED WITH PLANNED APPLICATION DATE
Air Emission Source	N/A	
Solid or Special Waste	N/A	
Hazardous Waste - Registration or Permit	N/A	

VI. DISCHARGE MONITORING REPORTS (DMRs)

KPDES permit holders are required to submit DMRs to the Division of Water on a regular schedule (as defined by the KPDES permit). The information in this section serves to specifically identify the department, office or individual you designate as responsible for submitting DMR forms to the Division of Water.

A. Name of department, office or official submitting DMRs:	Logos Engineering
B. Address where DMR forms are to be sent. (Complete only if address is different from mailing address in Section I.)	
DMR Mailing Name:	Logos Engineering
DMR Mailing Street:	P.O. Box 350 / 275 White Street
DMR Mailing City, State, Zip Code:	Manchester, KY 40962
DMR Official Telephone Number:	(606) 598-6746

VII. APPLICATION FILING FEE

KPDES regulations require that a permit applicant pay an application filing fee equal to twenty percent of the permit base fee. Please examine the base and filing fees listed below and in the Form 1 instructions and enclose a check payable to "Kentucky State Treasurer" for the appropriate amount. Descriptions of the base fee amounts are given in the "General Instructions."

Facility Fee Category:

Surface Mining Operation *HAZARD*

Filing Fee Enclosed:

\$240.00

VIII. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print):

Stephen Hamilton / Secretary-Treasurer

TELEPHONE NUMBER (area code and number):

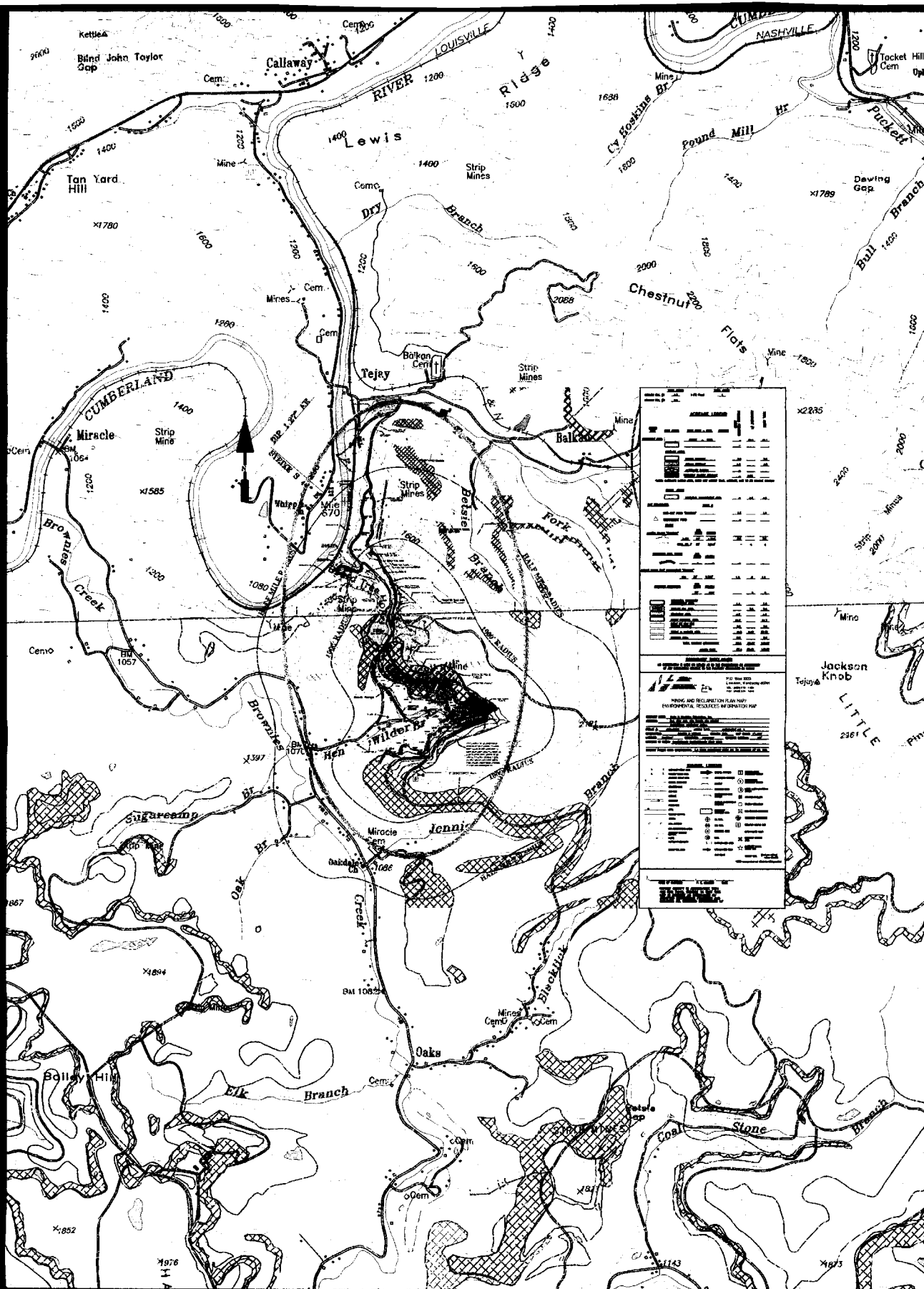
(502) 348-0084

SIGNATURE

Stephen Hamilton

DATE:

February 27, 2007

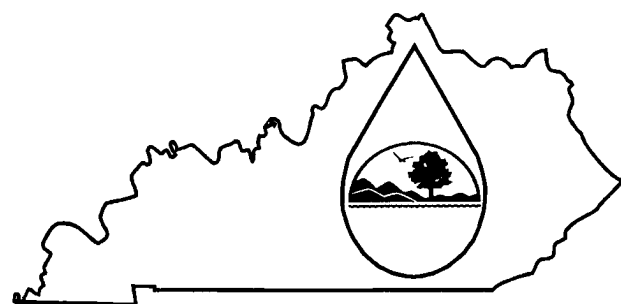


Nally & Hamilton Enterprises Inc.
Permit #: 807-8056

Location Map

Scale: 1" = 2000'

KPDES FORM C



KENTUCKY POLLUTANT DISCHARGE ELIMINATION SYSTEM

PERMIT APPLICATION

A complete application consists of this form and Form 1.
 For additional information, contact KPDES Branch, (502) 564-3410.

Name of Facility: Nally & Hamilton Enterprises, Inc. Wilder Br.				County: Bell			
I. OUTFALL LOCATION				AGENCY USE			

For each outfall list the latitude and longitude of its location to the nearest 15 seconds and the name of the receiving water.

Outfall No. (list)	LATITUDE			LONGITUDE			RECEIVING WATER (name)
	Degrees	Minutes	Seconds	Degrees	Minutes	Seconds	
See Attachment							

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES

- A. Attach a line drawing showing the water flow through the facility. Indicate sources of intake water, operations contributing wastewater to the effluent, and treatment units labeled to correspond to the more detailed descriptions in Item B. Construct a water balance on the line drawing by showing average flows between intakes, operations, treatment units, and outfall. If a water balance cannot be determined (e.g., for certain mining activities), provide a pictorial description of the nature and amount of any sources of water and any collection or treatment measures.
- B. For each outfall, provide a description of: (1) all operations contributing wastewater to the effluent, including process wastewater, sanitary wastewater, cooling water, and storm water runoff; (2) the average flow contributed by each operation; and (3) the treatment received by the wastewater. Continue on additional sheets if necessary.

OUTFALL NO. (list)	OPERATION(S) CONTRIBUTING FLOW		TREATMENT	
	Operation (list)	Avg/Design Flow (include units)	Description	List Codes from Table C-1
A	Surface Mining	35.37	None Proposed	I - U
B	Surface Mining	30.41	None Proposed	I - U
C	Surface Mining	36.69	None Proposed	I - U
D	Surface Mining	18.24	None Proposed	I - U
E	Surface Mining	53.12	None Proposed	I - U
F	Surface Mining	24.95	None Proposed	I - U
G	Surface Mining	76.25	None Proposed	I - U
I-PS	Surface Mining	175.02	None Proposed	I - U

Nally & Hamilton Enterprises, Inc.

DNR Permit No. 807-8056 AM 01

I (Continued)

Outfall Locations

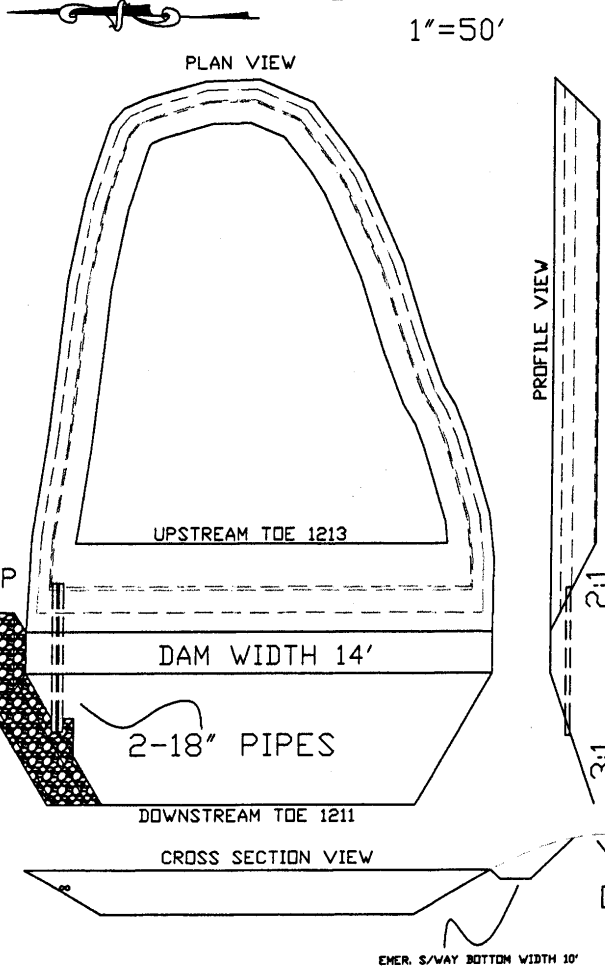
Pond	Latitude	Longitude	Receiving Water
A	36° 45' 3.59"	83° 33' 31.98"	Cumberland River
B	36° 44' 47.76"	83° 33' 37.24"	Hen Wilder Branch
C	36° 44' 44.12"	83° 33' 30.08"	Hen Wilder Branch
D	36° 44' 34.11"	83° 33' 22.20"	Hen Wilder Branch
E	36° 44' 29.84"	83° 33' 25.55"	Hen Wilder Branch
F	36° 44' 29.80"	83° 33' 33.14"	Hen Wilder Branch
G	36° 44' 53.21"	83° 33' 37.22"	Hen Wilder Branch
I-PS	36° 44' 38.92"	83° 33' 22.42"	Hen Wilder Branch

I-PS EXISTING POND 1"=50'

(signature) *[Signature]*
(registration no.) 12575
(date) 4/6/04
I hereby certify, in accordance with 405 KAR 7:04DE, Section 10, that this document is correct as determined by accepted engineering practices and includes all the information required of it by KRS Chapter 350 and KAR Title 405. (Affix engineer's seal)

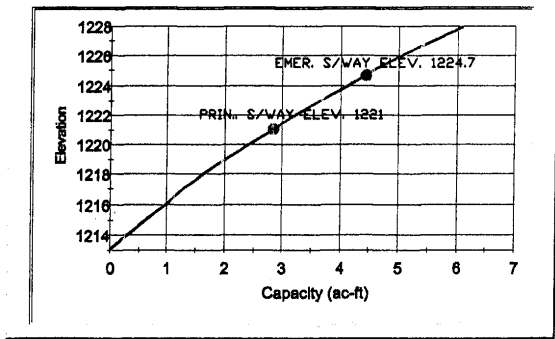
EMER. S/WAY BOTTOM WIDTH 10'

PIPE OUTLET RIP-RAPPED IF NOT DISCHARGING INTO SPILLWAY CHANNEL



--- EMERGENCY S/WAY ELEV.
--- PRINC. S/WAY ELEV.
--- SEDIMENT ELEV.

SEDIMENT LEVEL/CLEANOUT ELEV.
EMER. S/WAY SIDE SLOPE 2
EMER. S/WAY BOTTOM WIDTH 10'
EMER. S/WAY ELEV. 1224.7
PRIN. S/WAY ELEV. 1221
TOP OF DAM ELEV. 1228
BOTTOM ELEV. 1213

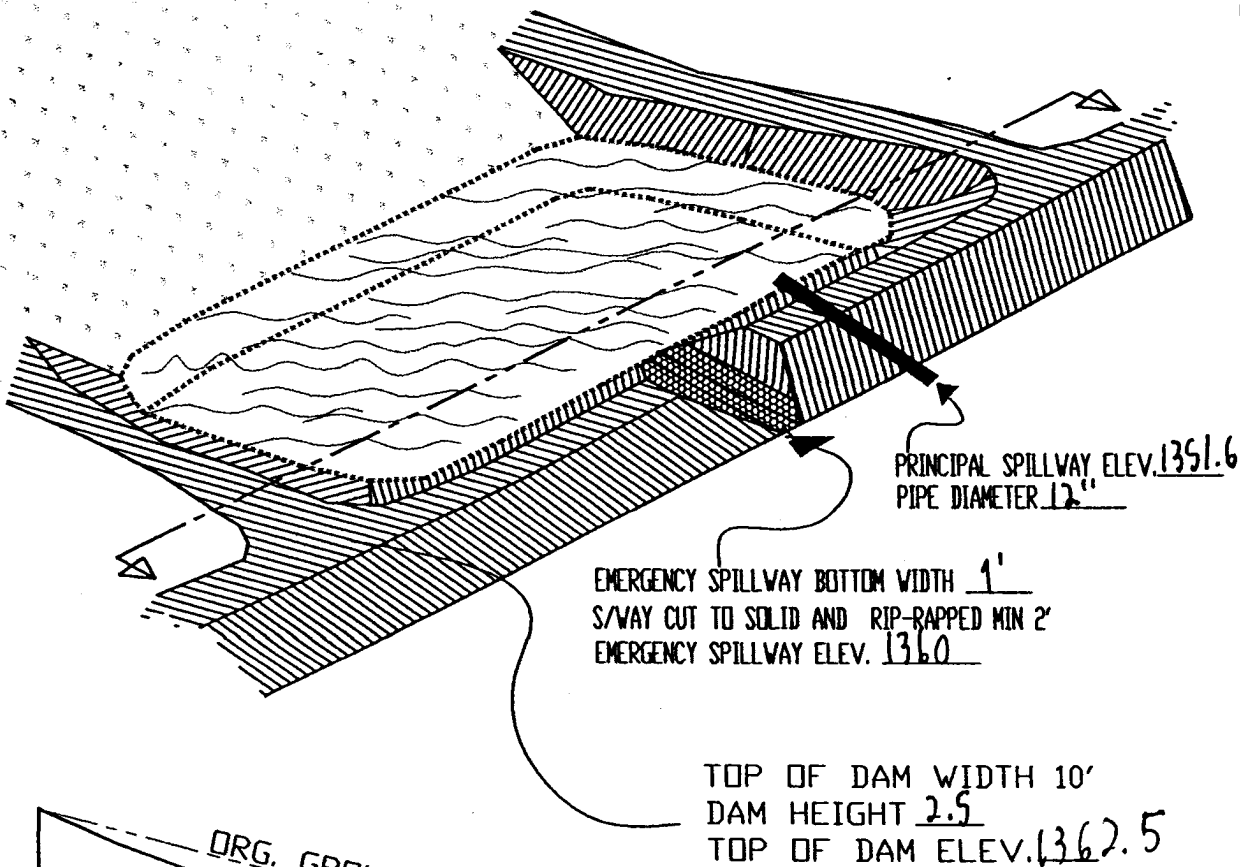


SILT STRUCTURE# A

NOT TO SCALE

POND DIMENSIONS

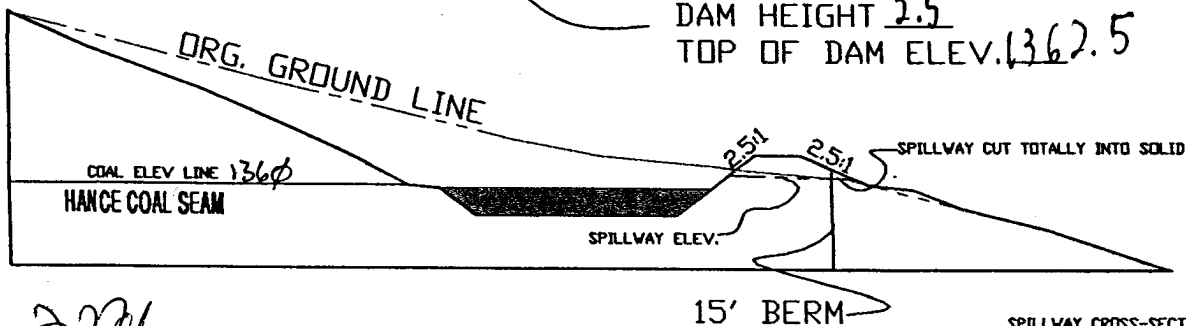
BOTTOM WIDTH	5'
TOP WIDTH AT EMER. SPILLWAY	63'
BOTTOM LENGTH	94'
TOP LENGTH AT EMER. SPILLWAY	157'
POND DEPTH	14.5'
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1




ORG. GND

BOTTOM ELEV. 1345.5
SEDIMENT POOL ELEV. 1350.1
CLEANOUT 100%

ORG. GND




 hereby certify, in accordance with 405 KAR 7040E, Section 10, that
 this document is correct as determined by accepted engineering
 practices and includes all the information required of it by KRS
 Chapter 350 and KAR Title 405. (Affix engineer's seal)

12575

02/17/06

SPILLWAY CUT TOTALLY INTO SOLID

Org. Gnd. Line
Water Level

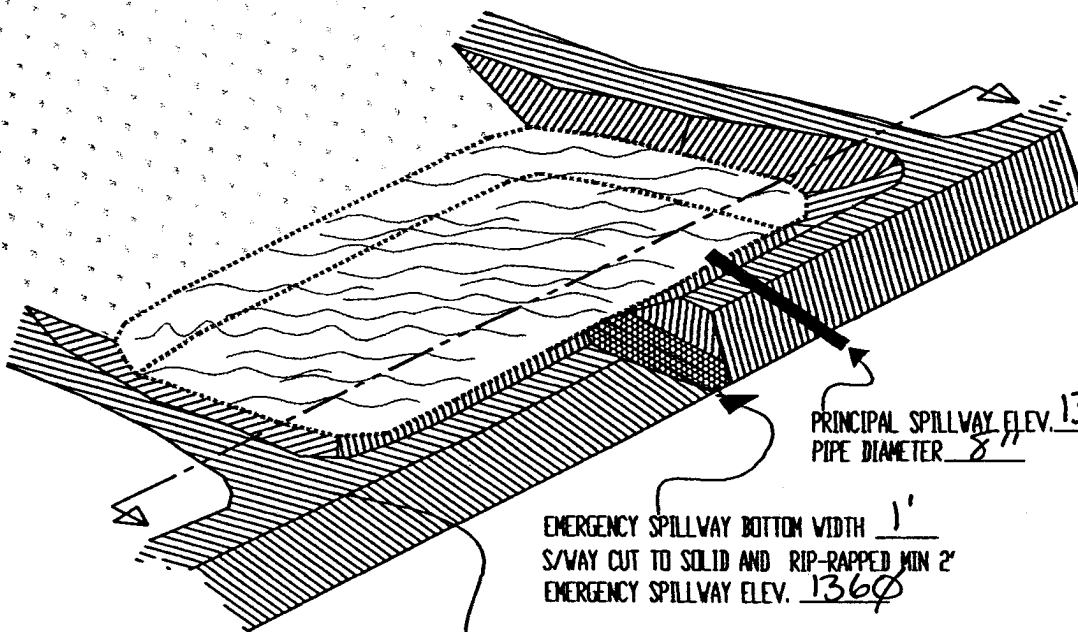
Top of Dam

SILT STRUCTURE # B

NOT TO SCALE

POND DIMENSIONS

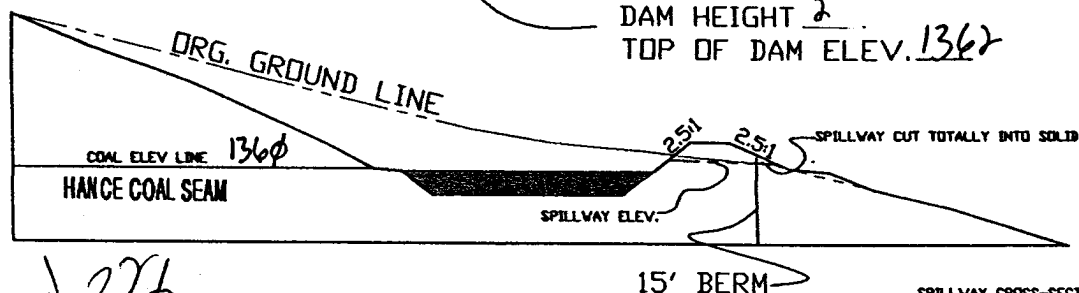
BOTTOM WIDTH 5'
 TOP WIDTH AT EMER. SPILLWAY 61
 BOTTOM LENGTH 94
 TOP LENGTH AT EMER. SPILLWAY 150
 POND DEPTH 14
 POND SIDE SLOPES 2:1
 SPILLWAY SIDE SLOPES 2:1



PRINCIPAL SPILLWAY ELEV. 1352.6
 PIPE DIAMETER 8"

EMERGENCY SPILLWAY BOTTOM WIDTH 1'
 S/WAY CUT TO SOLID AND RIP-RAPPED MIN 2'
 EMERGENCY SPILLWAY ELEV. 1360

TOP OF DAM WIDTH 10'
 DAM HEIGHT 2'
 TOP OF DAM ELEV. 1362



ORG. GND

BOTTOM ELEV 1346
 SEDIMENT POOL ELEV 1351.1
 CLEANOUT 100%

ORG. GND

SPILLWAY CROSS-SECTION

SPILLWAY CUT TOTALLY INTO SOLID

Org. Gnd. Line
 Water Level

Top of Dam

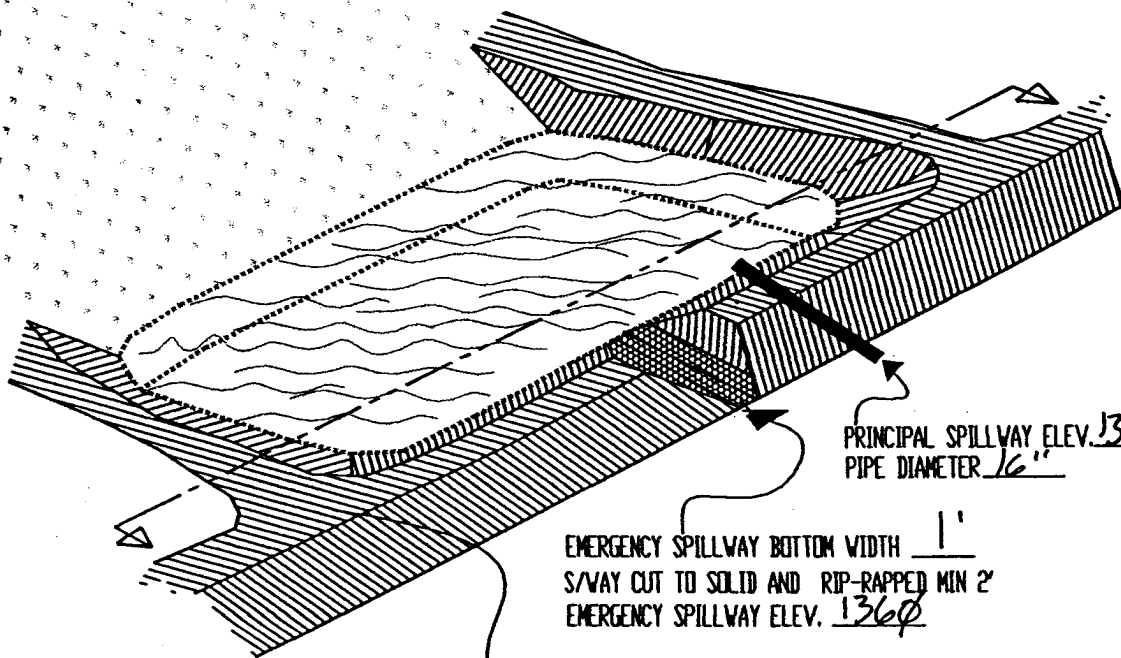
I, [Signature] 12575 08/17/06
 (signature) (registration no.) (date)
 hereby certify, in accordance with 405 KAR 7440E, Section 10, that
 this document is correct as determined by accepted engineering
 practices and includes all the information required of it by KRS
 Chapter 350 and KAR Title 405. (Affix engineer's seal)

SILT STRUCTURE# C

NOT TO SCALE

POND DIMENSIONS

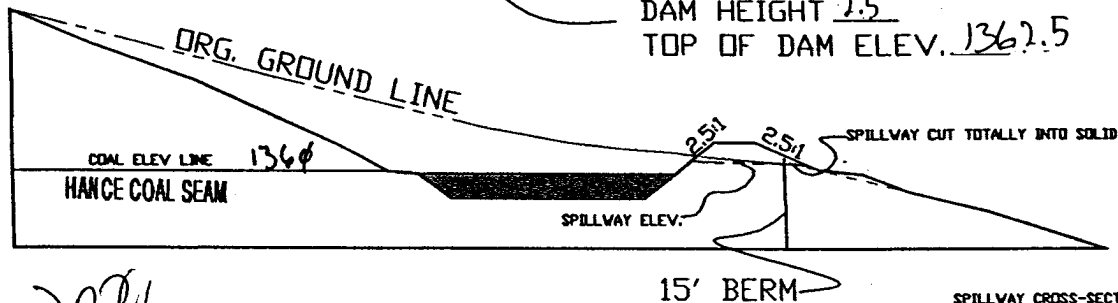
BOTTOM WIDTH	5
TOP WIDTH AT EMER. SPILLWAY	61
BOTTOM LENGTH	94
TOP LENGTH AT EMER. SPILLWAY	150
POND DEPTH	14.5
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1



PRINCIPAL SPILLWAY ELEV. 1353.5
PIPE DIAMETER 16"

EMERGENCY SPILLWAY BOTTOM WIDTH 1'
S/WAY CUT TO SOLID AND RIP-RAPPED MIN 2'
EMERGENCY SPILLWAY ELEV. 1360

TOP OF DAM WIDTH 10'
DAM HEIGHT 2.5
TOP OF DAM ELEV. 1362.5



ORG. GND

BOTTOM ELEV. 1345.5
SEDIMENT POOL ELEV. 1351.9
CLEANOUT 100%

ORG. GND

SPILLWAY CROSS-SECTION

SPILLWAY CUT TOTALLY INTO SOLID

Org. Gnd. Line
Water Level

Top of Dam

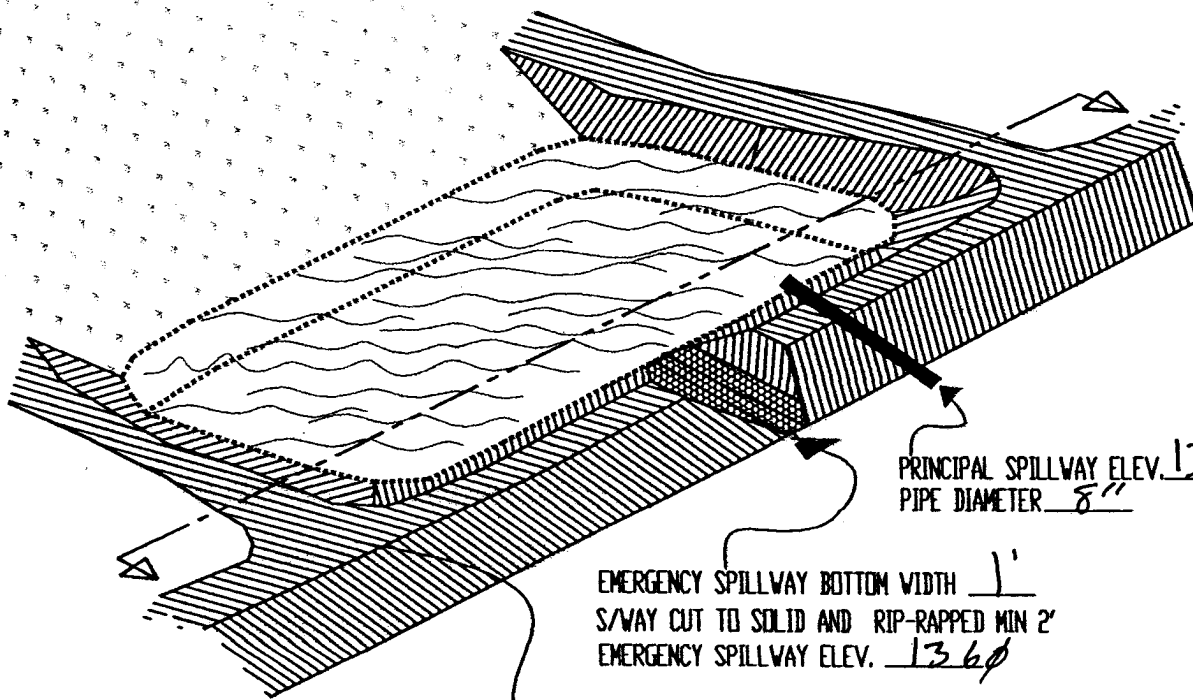
I. [Signature] 12575 02/17/06
(signature) (registration no.) (date)
hereby certify, in accordance with 405 KAR 7040E, Section 10, that
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practices and includes all the information required of it by KRS
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SILT STRUCTURE# D

NOT TO SCALE

POND DIMENSIONS

BOTTOM WIDTH	5'
TOP WIDTH AT EMER. SPILLWAY	61'
BOTTOM LENGTH	94'
TOP LENGTH AT EMER. SPILLWAY	150'
POND DEPTH	13.5'
POND SIDE SLOPES	2:1
SPILLWAY SIDE SLOPES	2:1



ORG. GND

BOTTOM ELEV. 1346.2
SEDIMENT POOL ELEV. 1352.9
CLEANOUT 100%

ORG. GND

ORG. GROUND LINE

COAL ELEV LINE 1360
HANCE COAL SEAM

SPILLWAY ELEV.

SPILLWAY CUT TOTALLY INTO SOLID

SPILLWAY CROSS-SECTION

SPILLWAY CUT TOTALLY INTO SOLID

Org. Gnd. Line
Water Level

Top of Dam

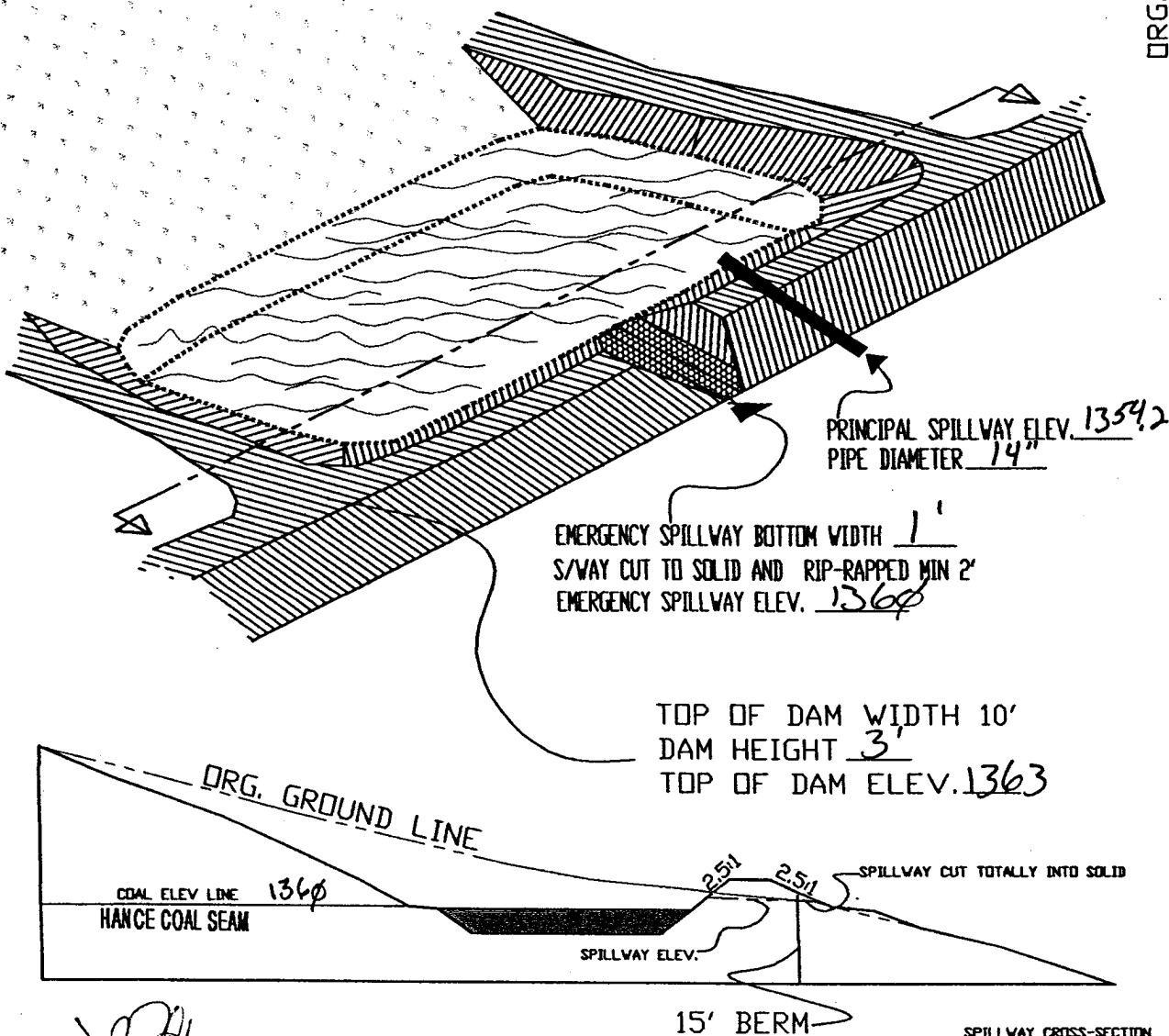
I. [Signature] 12575 02/17/06
(signature) (registration no) (date)
hereby certify, in accordance with 405 KAR 7040E, Section 10, that
this document is correct as determined by accepted engineering
practices and includes all the information required of it by KRS
Chapter 350 and KAR Title 405. (Affix engineer's seal)

SILT STRUCTURE # E

NOT TO SCALE

POND DIMENSIONS

BOTTOM WIDTH	40'
TOP WIDTH AT EMER. SPILLWAY	66'
BOTTOM LENGTH	120'
TOP LENGTH AT EMER. SPILLWAY	146'
POND DEPTH	13'
POND SIDE SLOPES	1:1
SPILLWAY SIDE SLOPES	2:1



ORG. GND

BOTTOM ELEV 1347
SEDIMENT POOL ELEV 1352.6
CLEANOUT 100%

ORG. GND

I, [Signature] 12575 02/11/06
(Signature) (Registration no.) (Date)
hereby certify, in accordance with 405 KAR 7040E, Section 10, that
this document is correct as determined by accepted engineering
practices and includes all the information required of it by KRS
Chapter 350 and KAR Title 405. (Affix engineer's seal)

SPILLWAY CUT TOTALLY INTO SOLID

Org. Gnd. Line
Water Level

Top of Dam

SILT STRUCTURE# F

NOT TO SCALE

POND DIMENSIONS

BOTTOM WIDTH 5'

TOP WIDTH AT EMER. SPILLWAY 65

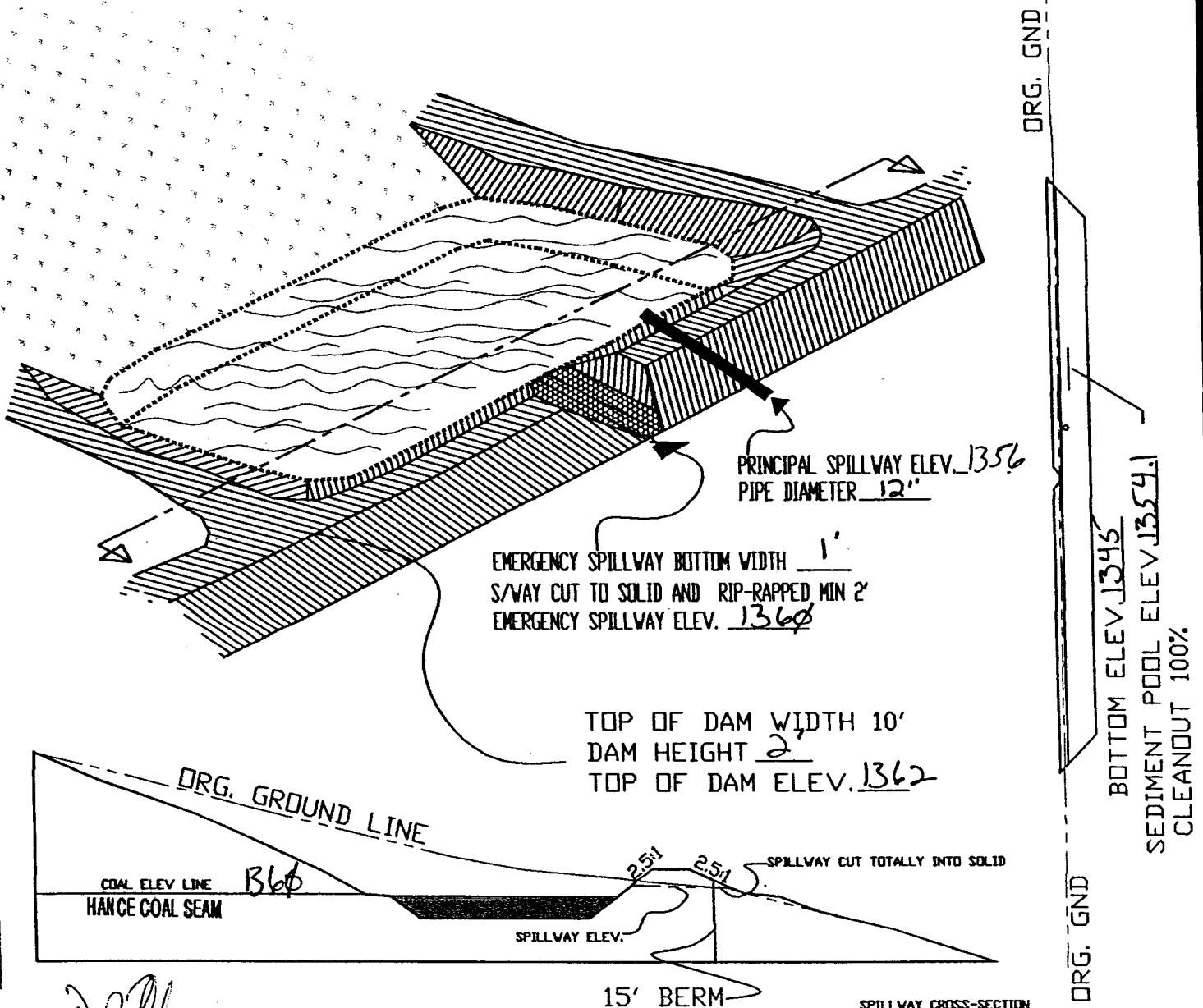
BOTTOM LENGTH 94'

TOP LENGTH AT EMER. SPILLWAY 154

POND DEPTH 15'

POND SIDE SLOPES 21

SPILLWAY SIDE SLOPES $\phi.25:1$



I, D. R. H. 12575 02/17/06
(signature) (registration no) (date)
heretby certify, in accordance with 405 KAR 7440E, Section 10, that
this document is correct as determined by accepted engineering
practices and includes all the information required of it by KRS
Chapter 350 and KAR Title 405. (Affix engineer's seal)

SPILLWAY CUT TOTALLY INTO SOLID

AY CUT TOTALLY INTO SOLID

Top of Dam

Org. Gnd. Line

Water Level

II. FLOWS, SOURCES OF POLLUTION, AND TREATMENT TECHNOLOGIES (Continued)

C. Except for storm water runoff, leaks, or spills, are any of the discharges described in Items II-A or B intermittent or seasonal?

☒ Yes (Complete the following table.)

☐ No (Go to Section III.)

OUTFALL NUMBER	OPERATIONS CONTRIBUTING FLOW	FREQUENCY		FLOW				Duration (in days)
		Days Per Week	Months Per Year	Flow Rate (in mgd)		Total volume (specify with units)		
		(specify average)	(specify average)	Long-Term Average	Maximum Daily	Long-Term Average	Maximum Daily	
(list)	(list)							
A	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
B	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
C	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
D	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
E	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
F	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
G	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown
I-PS	Surface Mining	7	8	<0.1	<0.1	<0.1	<0.1	Unknown

III. MAXIMUM PRODUCTION

A. Does an effluent guideline limitation promulgated by EPA under Section 304 of the Clean Water Act apply to your facility?

☒ Yes (Complete Item III-B) List effluent guideline category:

☐ No (Go to Section IV)

B. Are the limitations in the applicable effluent guideline expressed in terms of production (or other measures of operation)?

☐ Yes (Complete Item III-C) ☒ No (Go to Section IV)

C. If you answered "Yes" to Item III-B, list the quantity which represents the actual measurement of your maximum level of production, expressed in the terms and units used in the applicable effluent guideline, and indicate the affected outfalls.

MAXIMUM QUANTITY			Affected Outfalls (list outfall numbers)
Quantity Per Day	Units of Measure	Operation, Product, Material, Etc. (specify)	

IV. IMPROVEMENTS

A. Are you now required by any federal, state or local authority to meet any implementation schedule for the construction, upgrading, or operation of wastewater equipment or practices or any other environmental programs which may affect the discharges described in this application? This includes, but is not limited to, permit conditions, administrative or enforcement orders, enforcement compliance schedule letters, stipulations, court orders and grant or loan conditions.

☐ Yes (Complete the following table)

☒ No (Go to Item IV-B)

IDENTIFICATION OF CONDITION AGREEMENT, ETC.	AFFECTED OUTFALLS		BRIEF DESCRIPTION OF PROJECT	FINAL COMPLIANCE DATE	
	No.	Source of Discharge		Required	Projected

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- B. OPTIONAL:** You may attach additional sheets describing any additional water pollution control programs (or other environmental projects which may affect your discharges) you now have under way or which you plan. Indicate whether each program is now under way or planned, and indicate your actual or planned schedules for construction.

V. INTAKE AND EFFLUENT CHARACTERISTICS

A, B, & C: See instructions before proceeding – Complete one set of tables for each outfall – Annotate the outfall number in the space provided.

NOTE: Tables V-A, V-B, and V-C are included on separate sheets numbered 5-18.

- D. Use the space below to list any of the pollutants (refer to SARA Title III, Section 313) listed in Table C-3 of the instructions, which you know or have reason to believe is discharged or may be discharged from any outfall. For every pollutant you list, briefly describe the reasons you believe it to be present and report any analytical data in your possession.

POLLUTANT	SOURCE	POLLUTANT	SOURCE

VI. POTENTIAL DISCHARGES NOT COVERED BY ANALYSIS

- A. Is any pollutant listed in Item V-C a substance or a component of a substance which you use or produce, or expect to use or produce over the next 5 years as an immediate or final product or byproduct?

☐ Yes (List all such pollutants below)

☒ No (Go to Item VI-B)

- B. Are your operations such that your raw materials, processes, or products can reasonably be expected to vary so that your discharge of pollutants may during the next 5 years exceed two times the maximum values reported in Item V?

☐ Yes (Complete Item VI-C)

☒ No (Go to Item VII)

- C. If you answered "Yes" to Item VI-B, explain below and describe in detail to the best of your ability at this time the sources and expected levels of such pollutants which you anticipate will be discharged from each outfall over the next 5 years. Continue on additional sheets if you need more space.

VII. BIOLOGICAL TOXICITY TESTING DATA

Do you have any knowledge of or reason to believe that any biological test for acute or chronic toxicity has been made on any of your discharges or on a receiving water in relation to your discharge within the last 3 years?

☐ Yes (Identify the test(s) and describe their purposes below)

☒ No (Go to Section VIII)

VIII. CONTRACT ANALYSIS INFORMATION

Were any of the analyses reported in Item V performed by a contract laboratory or consulting firm?

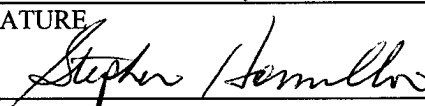
☐ Yes (list the name, address, and telephone number of, and pollutants analyzed by each such laboratory or firm below)

☒ No (Go to Section IX)

NAME	ADDRESS	TELEPHONE (Area code & number)	POLLUTANTS ANALYZED (list)

IX. CERTIFICATION

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

NAME AND OFFICIAL TITLE (type or print): Stephen Hamilton / Secretary-Treasurer	TELEPHONE NUMBER (area code and number): (502) 348-0084
SIGNATURE 	DATE February 27, 2007

PLEASE PRINT OR TYPE IN THE UNSHADED AREAS ONLY. You may report some or all of this information on separate sheets (use the same format) instead of completing these pages. (See instructions)

V. INTAKE AND EFFLUENT CHARACTERISTICS (Continued from page 3 of Form C)										OUTFALL NO.		
Part A – You must provide the results of at least one analysis for every pollutant in this table. Complete one table for each outfall. See instructions for additional details.												
1. POLLUTANT	2. EFFLUENT						3. UNITS (specify if blank)		4. INTAKE (optional)			
	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No of Analyses
	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Biochemical Oxygen Demand (BOD)								N/A				
b. Chemical Oxygen Demand (COD)								N/A				
c. Total Organic Carbon (TOC)								N/A				
d. Total Suspended Solids (TSS)							1	12 Mg/L				
e. Ammonia (as N)								N/A				
f. Flow (in units of MGD)	VALUE		VALUE		VALUE		1	10 gpm MGD		VALUE		
g. Temperature (winter)	VALUE		VALUE		VALUE			1.11 °c		VALUE		
h. Temperature (summer)	VALUE		VALUE		VALUE			24.44 °c		VALUE		
i. pH	MINIMUM	MAXIMUM	MINIMUM	MAXIMUM				STANDARD UNITS 8.10				

Part B - In the MARK "X" column, place an "X" in the Believed Present column for each pollutant you know or have reason to believe is present. Place an "X" in the Believed Absent column for each pollutant you believe to be absent. If you mark the Believed Present column for any pollutant, you must provide the results of at least one analysis for that pollutant. Complete one table for each outfall. See the instructions for additional details and requirements.

1. POLLUTANT AND CAS NO. (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		6. INTAKE (optional)		
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
			(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
a. Bromide (24959-67-9)		X												
b. Bromine Total Residual		X												
c. Chloride		X												
d. Chlorine, Total Residual		X												
e. Color		X												
f. Fecal Coliform		X												
g. Fluoride (16984-48-8)		X												
h. Hardness (as CaCO ₃)		X												
i. Nitrate – Nitrite (as N)		X												
j. Nitrogen, Total Organic (as N)		X												
k. Oil and Grease		X												
l. Phosphorous (as P), Total 7723-14-0		X												
m. Radioactivity														
(1) Alpha, Total		X												
(2) Beta, Total		X												
(3) Radium Total		X												
(4) Radium, 226, Total		X												

Part B - Continued														
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"		3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses
			(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
			Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
n. Sulfate (as SO ₄) (14808-79-8)	X		65						1	Mg/L				
o. Sulfide (as S)		X												
p. Sulfite (as SO ₃) (14286-46-3)		X												
q. Surfactants		X												
r. Aluminum, Total (7429-90)		X												
s. Barium, Total (7440-39-3)		X												
t. Boron, Total (7440-42-8)		X												
u. Cobalt, Total (7440-48-4)		X												
v. Iron, Total (7439-89-6)	X		0.22						1	Mg/L				
w. Magnesium Total (7439-96-4)		X												
x. Molybdenum Total (7439-98-7)		X												
y. Manganese, Total (7439-96-6)	X		0.15						1	Mg/L				
z. Tin, Total (7440-31-5)		X												
aa. Titanium, Total (7440-32-6)		X												

Part C – If you are a primary industry and this outfall contains process wastewater, refer to Table C-2 in the instructions to determine which of the GC/MS fractions you must test for. Mark “X” in the **Testing Required** column for all such GC/MS fractions that apply to your industry and for ALL toxic metals, cyanides, and total phenols. If you are not required to mark this column (secondary industries, nonprocess wastewater outfalls, and non-required GC/MS fractions), mark “X” in the **Believed Present** column for each pollutant you know or have reason to believe is present. Mark “X” in the **Believed Absent** column for each pollutant you believe to be absent. If you mark either the **Testing Required** or **Believed Present** columns for any pollutant, you must provide the result of at least one analysis for that pollutant. Note that there are seven pages to this part; please review each carefully. Complete one table (all seven pages) for each outfall. See instructions for additional details and requirements.

one table (all seven pages) for each outlet. See instructions for additional details and requirements.																	
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)			
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses		
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)			
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass			
METALS, CYANIDE AND TOTAL PHENOLS																	
1M. Antimony Total (7440-36-0)		X		0.002						1	Mg/L						
2M. Arsenic, Total (7440-38-2)			X														
3M. Beryllium Total (7440-41-7)		X		0.001						1	Mg/L						
4M. Cadmium Total (7440-43-9)		X		0.002						1	Mg/L						
5M. Chromium Total (7440-43-9)		X		0.002						1	Mg/L						
6M. Copper Total (7550-50-8)		X		0.02						1	Mg/L						
7M. Lead Total (7439-92-1)		X		0.001						1	Mg/L						
8M. Mercury Total (7439-97-6)		X		0.0001						1	Mg/L						
9M. Nickel, Total (7440-02-0)		X		0.01						1	Mg/L						
10M. Selenium, Total (7782-49-2)		X		0.003						1	Mg/L						
11M. Silver, Total (7440-28-0)		X		0.01						1	Mg/L						

Part C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass		
METALS, CYANIDE AND TOTAL PHENOLS (Continued)																
12M. Thallium, Total (7440-28-0)		X		0.1						1	Mg/L					
13M. Zinc, Total (7440-66-6)		X		0.005						1	Mg/L					
14M. Cyanide, Total (57-12-5)		X		0.01						1	Mg/L					
15M. Phenols, Total		X		0.01						1	Mg/L					
DIOXIN																
2,3,7,8 Tetra- chlorodibenzo, P, Dioxin (1784-01-6)			X	DESCRIBE RESULTS:												
GC/MS FRACTION – VOLATILE COMPOUNDS																
1V. Acrolein (107-02-8)			X													
2V. Acrylonitrile (107-13-1)			X													
3V. Benzene (71-43-2)			X													
5V. Bromoform (75-25-2)			X													
6V. Carbon Tetrachloride (56-23-5)			X													
7V. Chloro- benzene (108-90-7)			X													
8V. Chlorodibro- momethane (124-48-1)			X													

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses
				Maximum Daily Value		Maximum 30-Day Value (if available)		Long-Term Avg. Value (if available)					Long-Term Avg Value		
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
9V. Chloroethane (74-00-3)			X												
10V. 2-Chloro- ethylvinyl Ether (110-75-8)			X												
11V. Chloroform (67-66-3)			X												
12V. Dichloro- bromomethane (75-71-8)			X												
14V. 1,1- Dichloroethane (75-34-3)			X												
15V. 1,2- Dichloroethane (107-06-2)			X												
16V. 1,1- Dichlorethylene (75-35-4)			X												
17V. 1,2-Di- chloropropane (78-87-5)			X												
18V. 1,3- Dichloropro- pylene (452-75-6)			X												
19V. Ethyl- benzene (100-41-4)			X												
20V. Methyl Bromide (74-83-9)			X												

Part C – Continued																	
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)				
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses		
				Maximum Daily Value		Concentration		Concentration					Concentration			Long-Term Avg. Value	
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass			
21V. Methyl Chloride (74-87-3)			X														
22V. Methylene Chloride (75-00-2)			X														
23V. 1,1,2,2- Tetrachloro- ethane (79-34-5)			X														
24V. Tetrachloro- ethylene (127-18-4)			X														
25V. Toluene (108-88-3)			X														
26V. 1,2-Trans- Dichloro- ethylene (156-60-5)			X														
27V. 1,1,1-Tri- chloroethane (71-55-6)			X														
28V. 1,1,2-Tri- chloroethane (79-00-5)			X														
29V. Trichloro- ethylene (79-01-6)			X														
30V. Vinyl Chloride (75-01-4)			X														

Part C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses	
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)		
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass		
GC/MS FRACTION – ACID COMPOUNDS																
1A. 2-Chloro-phenol (95-57-8)			X													
2A. 2,4-Dichloro-phenol (120-83-2)			X													
3A. 2,4-Dimethylphenol (105-67-9)			X													
4A. 4,6-Dinitro-o-cresol (534-52-1)			X													
5A. 2,4-Dinitro-phenol (51-28-5)			X													
6A. 2-Nitro-phenol (88-75-5)			X													
7A. 4-Nitro-phenol (100-02-7)			X													
8A. P-chloro-m-cresol (59-50-7)			X													
9A. Pentachloro-phenol (87-88-5)			X													
10A. Phenol (108-05-2)		X		0.01						1	Mg/L					
11A. 2,4,6-Trichlorophenol (88-06-2)			X													
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS																
1B. Acenaphthene (83-32-9)			X													

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses
				Maximum Daily Value									Long-Term Avg Value		
				(1) Concentration	(2) Mass	(1)	(2)	(1)	(2)				(1)	(2)	(1)
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
2B. Acena- phtylene (208-96-8)			X												
3B. Anthra- cene (120-12-7)			X												
4B. Benzidine (92-87-5)			X												
5B. Benzo(a)- anthracene (56-55-3)			X												
6B. Benzo(a)- pyrene (50-32-8)			X												
7B. 3,4-Benzo- fluoranthene (205-99-2)			X												
8B. Benzo(ghi) perylene (191-24-2)			X												
9B. Benzo(k)- fluoranthene (207-08-9)			X												
10B. Bis(2- chlor- oethoxy)- methane (111-91-1)			X												
11B. Bis (2-chlor- oisopropyl)- Ether			X												
12B. Bis (2-ethyl- hexyl)- phthalate (117-81-7)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK "X"			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)	
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
13B. 4-Bromo-phenyl Phenyl ether (101-55-3)			X												
14B. Butyl-benzyl phthalate (85-68-7)			X												
15B. 2-Chloro-naphthalene (7005-72-3)			X												
16B. 4-Chloro-phenyl phenyl ether (7005-72-3)			X												
17B. Chrysene (218-01-9)			X												
18B. Dibenzo-(a,h) Anthracene (53-70-3)			X												
19B. 1,2-Dichloro-benzene (95-50-1)			X												
20B. 1,3-Dichloro-Benzene (541-73-1)			X												
21B. 1,4-Dichloro-benzene (106-46-7)			X												
22B. 3,3-Dichloro-benzidene (91-94-1)			X												
23B. Diethyl Phthalate (84-66-2)			X												

Part C – Continued

Part C – Continued																
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT								4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a. Maximum Daily Value		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg. Value		b. No. of Analyses	
				(1)	(2)	(1)	(2)	(1)	(2)				(1)	(2)		
				Concentration	Mass	Concentration	Mass	Concentration	Mass				Concentration	Mass		
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)																
24B. Dimethyl Phthalate (131-11-3)			X													
25B. Di-N- butyl Phthalate (84-74-2)			X													
26B. 2,4-Dinitro- toluene (121-14-2)			X													
27B. 2,6-Dinitro- toluene (606-20-2)			X													
28B. Di-n-octyl Phthalate (117-84-0)			X													
29B. 1,2- diphenyl- hydrazine (as azonbenzene) (122-66-7)			X													
30B. Fluoranthene (208-44-0)			X													
31B. Fluorene (86-73-7)			X													
32B. Hexachloro- benzene (118-71-1)			X													
33B. Hexachloro- butadiene (87-68-3)			X													
34B. Hexachloro- cyclopenta- diene (77-47-4)			X													

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses
				Maximum Daily Value		Maximum 30-Day Value (if available)		Long-Term Avg. Value (if available)					Long-Term Avg Value		
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	
GC/MS FRACTION – BASE/NEUTRAL COMPOUNDS (Continued)															
35B. Hexachloroethane (67-72-1)			X												
36B. Indneo-(1,2,3-oc)-Pyrene (193-39-5)			X												
37B. Isophorone (78-59-1)			X												
38B. Napthalene (91-20-3)			X												
39B. Nitrobenzene (98-95-3)			X												
40B. N-Nitroso-dimethylamine (62-75-9)			X												
41B. N-nitrosodi-n-propylamine (621-64-7)			X												
42B. N-nitrosodiphenylamine (86-30-6)			X												
43B. Phenanthrene (85-01-8)			X												
44B. Pyrene (129-00-0)			X												
45B. 1,2,4 Trichlorobenzene (120-82-1)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a.		b. No. of Analyses
				Maximum Daily Value		Value (if available)		Value (if available)					Long-Term Avg. Value		
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	(1) Concentration
GC/MS FRACTION – PESTICIDES															
1P. Aldrin (309-00-2)			X												
2P. α-BHC (319-84-6)			X												
3P. β-BHC (58-89-9)			X												
4P. gamma-BHC (58-89-9)			X												
5P. δ-BHC (319-86-8)			X												
6P. Chlordane (57-74-9)			X												
7P. 4,4’-DDT (50-29-3)			X												
8P. 4,4’-DDE (72-55-9)			X												
9P. 4,4’-DDD (72-54-8)			X												
10P. Dieldrin (60-57-1)			X												
11P. α- Endosulfan (115-29-7)			X												
12P. β- Endosulfan (115-29-7)			X												
13P. Endosulfan Sulfate (1031-07-8)			X												
14P. Endrin (72-20-8)			X												

Part C – Continued															
1. POLLUTANT And CAS NO. (if available)	2. MARK “X”			3. EFFLUENT							4. UNITS		5. INTAKE (optional)		
	a. Testing Required	a. Believed Present	b. Believed Absent	a.		b. Maximum 30-Day Value (if available)		c. Long-Term Avg. Value (if available)		d. No. of Analyses	a. Concentration	b. Mass	a. Long-Term Avg Value		b. No. of Analyses
				Maximum Daily Value		Value (if available)		Value (if available)					Long-Term Avg Value		
				(1) Concentration	(2) Mass	(1) Concentration	(2) Mass	(1) Concentration	(2) Mass				(1) Concentration	(2) Mass	(1) Concentration
GC/MS FRACTION – PESTICIDES															
15P. Endrin Aldehyde (7421-93-4)			X												
16P. Heptachlor (76-44-8)			X												
17P. Heptaclor Epoxide (1024-57-3)			X												
18P. PCB-1242 (53469-21-9)			X												
19P. PCB-1254 (11097-69-1)			X												
20P. PCB-1221 (11104-28-2)			X												
21P. PCB-1232 (11141-16-5)			X												
22P. PCB-1248 (12672-29-6)			X												
23P. PCB-1260 (11096-82-5)			X												
24P. PCB-1016 (12674-11-2)			X												
25P. Toxaphene (8001-35-2)			X												

Logos Engineering
P.O. Box 350
Manchester, Kentucky 40962

Don R. Roberts
Professional Engineer

Office (606) 598-6746
Fax (606) 598-1544

May 18, 2007

Ms. Sara Beard
KPDES BRANCH
Division of Water
Frankfort Office Park
14 Reilly Road
Frankfort, KY 40601

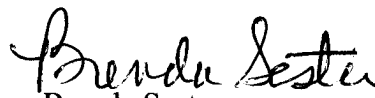
RE: Nally & Hamilton Enterprises, Inc.
DNR Permit #807-8056, AM 01
KPDES #KY0042765

Dear Sara:

Enclosed you will find KPDES FORM 1 (includes First National Bank Money Order for \$240.00 for filing fee) and KPDES FORM C concerning the above referenced project.

If you should have any questions, please contact our office.

Sincerely,


Brenda Sester
Logos Engineering

BS/

Enclosures



ERNIE FLETCHER
GOVERNOR

ENVIRONMENTAL AND PUBLIC PROTECTION CABINET

DEPARTMENT FOR ENVIRONMENTAL PROTECTION

DIVISION OF WATER

14 REILLY ROAD

FRANKFORT, KENTUCKY 40601-1190

www.kentucky.gov

TERESA J. HILL
SECRETARY

June 6, 2007

Mr. Stephen Hamilton
Nally & Hamilton Enterprises, Incorporated
Post Office Box 157
Balkan, Kentucky 40977

Re: Complete KPDES Permit Application
KPDES No.: KY0042765
AI ID: 133
Wilder Branch Job
Bell County, Kentucky

Dear Mr. Hamilton:

Your Kentucky Pollutant Discharge Elimination System (KPDES) permit application for the above-referenced facility was received by the Division of Water on May 23, 2007, and has been determined complete. As per 401 KAR 5:075, Section 1(7), the official effective date of your application has been determined as June 6, 2007, the date of this notice.

A technical review of your permit application will commence in the near future. Please be aware that you may be asked to provide additional information to clarify, modify, or supplement your application material. A request for this additional information will not render your application incomplete.

If you have any questions concerning this matter, please contact Larry Sowder at (502) 564-8158, extension 472.

Sincerely,

Nancy Green, Program Coordinator
Inventory and Data Management Section
KPDES Branch
Division of Water

NG:ng

c: Division of Water Files